



## *Service Members, Veterans and their Families*

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### **ACTION PLAN**



*Office of the Deputy Mayor for Health and Human Services*



**NOVEMBER 2014**



## ***From Mayor Vincent C. Gray***

Three years ago the District of Columbia was invited to participate in the Service Members, Veterans and their Families Policy Academy hosted by the federal Substance Abuse and Mental Health Services Administration (SAMHSA). We sent an 11-person team of veteran policy stakeholders from the District to the academy, which brought together teams from 13 other states seeking to improve veteran mental health and substance abuse services in their jurisdictions.

Our team came back from the Policy Academy ripe with ideas and enthusiastic to start working to improve the District of Columbia's policies, practices and infrastructure to better serve our military community. I charged the team with convening a DC Service Members, Veterans and their Families Workgroup to coordinate the efforts of various government agencies and engage veterans and other community stakeholders in generating a strategic plan for objectives that the District can and should accomplish to improve services for our city's military population.

After an extensive planning process, this group — co-chaired by Dr. Elspeth Ritchie, chief medical officer for the DC Department of Behavioral Health, and Ariana Quiñones, chief of staff to the Deputy Mayor for Health and Human Services — identified objectives and strategies in five priority areas:

- Criminal Justice
- Economic Security and Employment
- Housing and Homelessness
- Education
- Healthcare

The development of this plan has brought together numerous individuals from community organizations, military branches, and District and federal agencies that serve DC's service members, veterans and their families. I want to recognize and thank those who contributed to the development of this plan for their efforts. As the objectives in this plan are woven into agency performance plans and coordinated across various offices and departments, we must continue our great work together to serve this important segment of our shared community. This plan epitomizes how we always do our best work: as "One City."

With deep gratitude for the sacrifices our community's honorable men and women have made in service to our country, I am pleased to present the District of Columbia Service Members, Veterans and their Families Action Plan.

A handwritten signature in black ink that reads "Vincent C. Gray". The signature is written in a cursive, flowing style.

Vincent C. Gray

Mayor, District of Columbia

A person wearing a dark hat and jacket is seen from behind, looking out over a vast field of tall, golden-brown grass. The scene is set during sunset or sunrise, with a warm, orange glow in the sky. The person's silhouette is dark against the bright background. The grass in the foreground is in sharp focus, while the person and the horizon are slightly blurred.

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## VISION

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*The Vision for the nation's capital is to have a system with no wrong door for service members, veterans and their families that can connect them to the right benefit or service at the right time for the individual.*





## BACKGROUND

In late 2011, the District of Columbia was invited to participate in the federal Substance Abuse and Mental Health Services Administration’s (SAMHSA) Service Members, Veterans and their Families (SMVF) Policy Academy. Representatives from the District of Columbia and 13 other states came together for a three-day Policy Academy to strengthen policies and processes for behavioral health care systems that serve our nation’s SMVF population.

The statewide teams left the Policy Academy committed to developing effective and sustainable action plans for improving services that benefit the SMVF population in their states by coordinating planning and implementation efforts across federal, state and local agencies. In collaboration with SAMHSA, the states agreed to fulfill the following objectives:

- Increase access to appropriate care.
- Close gaps in existing systems and build capacity.
- Increase interagency communication and collaboration.
- Incorporate evidence-based and best practices.
- Sustain these efforts for the long-term future.

The SMVF Workgroup was formed after the Policy Academy with the primary goal of producing an action plan to guide and strengthen citywide behavioral health care systems and services for the SMVF population through ongoing collaboration at the federal and local levels. The SMVF Action Plan is the culmination of three years of planning across numerous organizations, agencies and departments in the District. The actions laid out in this plan are intended to help key stakeholders develop a coordinated system of care that addresses important needs of service members, veterans and their families.

### NATIONAL SERVICE

*27,846 District of Columbia residents have served in the military.*

Source: U.S. Census Bureau, 2013 American Community Survey





The District's SMVF Workgroup developed the plan in this document with technical assistance from SAMHSA and knowledgeable leaders from the District of Columbia and across the country. The development of this plan was led by a cross-section of behavioral health, human services and veterans' services stakeholders in the District of Columbia.

The SMVF Workgroup has set the following goals for the city to achieve through interagency collaboration and tracking and measurement of associated outcomes:

- **Criminal Justice** – Decrease the number of incarcerated service members and veterans.
- **Economic Security and Employment** – Ensure economic security and self-sufficiency by connecting service members, veterans and their families to employment opportunities and benefits.
- **Housing and Homelessness** – End chronic homelessness for veterans.
- **Education** – Enhance opportunities and resources for service members, veterans and their families to pursue meaningful education and training.
- **Healthcare** – Improve access to quality healthcare that addresses the needs of service members, veterans and their families.

The men and women who serve our country and the families who sacrifice in support of service members deserve the best care and resources the District of Columbia can provide. Together, city agencies, community-based organizations and stakeholders from the District's military and veteran communities can help ensure everyone who serves has the opportunity to lead a happy and rewarding life.

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#### **HOUSING AND HOMELESSNESS**

*On a single night in January 2014, 406 veterans were homeless in the District of Columbia. Through the work of DC government agencies, federal government partners and local homeless-serving organizations, the District has realized a 25% decrease in veteran homelessness since 2012.*

Source: 2014 Point-in-Time Estimates of Homelessness, U.S. Department of Housing and Urban Development



## ACTION PLAN DEVELOPMENT

### EDUCATION

*More than 2,100 children of active duty and guard reserve military personnel attend school in the Washington metropolitan area.*

Source: DC Educational Opportunity for Military Children State Council

### CRIMINAL JUSTICE

*As of July 2014, 596 active Metropolitan Police Officers have been trained as Crisis Intervention Officers to respond to individuals suffering from mental health issues.*

Source: DC Department of Behavioral Health

In 2011, Mayor Vincent C. Gray pledged to improve the District of Columbia’s behavioral health care system for service members, veterans and their families in partnership with the federal Substance Abuse and Mental Health Services Administration (SAMHSA). The District took its first step towards this goal by participating in the SAMHSA-sponsored Service Members, Veterans and their Families Policy Academy.

At the SAMHSA Policy Academy, policymakers and stakeholders from the District of Columbia and 13 other states came together to discuss lessons learned from previous planning processes, as well as best practices in those states and local jurisdictions. After the Policy Academy, the DC team established the SMVF Workgroup, led by Dr. Elspeth Ritchie, chief medical officer for the DC Department of Behavioral Health, and Ariana Quiñones, chief of staff to the Deputy Mayor for Health and Human Services. This Workgroup began the process of identifying the strengths and needs of the SMVF population unique to the District of Columbia. Ultimately the District identified five core priorities on which to focus their efforts.

These priority areas include:

- Criminal Justice
- Economic Security and Employment
- Housing and Homelessness
- Education
- Healthcare





Following the Policy Academy, the Workgroup expanded their reach to include other District agencies and veteran-serving community-based organizations in the planning process. During this time, the Workgroup continued working with the experts at SAMHSA, who provided critical technical expertise and consultation regarding plan goals, objectives and strategies, as well as advice regarding plan implementation.

The SMVF Action Plan concentrates primarily on strategies the District government can take to improve services for the SMVF population. With the exception of additional District funds allocated to the DC Department of Human Services to provide housing for homeless veterans, the District's SMVF initiative will not rely on additional taxpayer funds for implementation. Workgroup members have been creative in determining how to use existing resources more efficiently and focusing recommendations on reorganizing systems, targeting resources and improving existing programs.

### **Community Engagement**

Community organizations that serve service members, veterans and their families, as well as veteran leaders across the District of Columbia were critical partners in determining the contents of the SMVF Action Plan, and they will continue to be critical in achieving each of the priority area goals.

The Workgroup and each of its committees included the voices of veterans, local and federal government officials, veteran-serving community-based organizations and other stakeholders. In addition to these stakeholders, the Workgroup benefited from the knowledge of local and national leaders in many fields and the best practices learned from other cities through SAMHSA's SMVF technical assistance center. Plan components were shared with and supported by the DC Advisory Board on Veterans Affairs. They have also been shared with the Veterans Leadership Council.

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### **HEALTHCARE**

*In Fiscal Year 2013, 57,422 service members, veterans and their family members were enrolled for care at District-based Veteran Affairs medical facilities.*

Source: U.S. Department of Veterans Affairs



**ECONOMIC SECURITY AND EMPLOYMENT**

*517 veterans in the District of Columbia received services from the DC Department of Employment Services in Fiscal Year 2014, including orientation programming, resume assistance, employment assessments, and job training.*

Source: DC Department of Employment Services

The SMVF Workgroup and the Office of the Deputy Mayor for Health and Human Services hosted a public meeting on October 1, 2014, to solicit feedback on the plan. In addition to many Workgroup members, the public meeting engaged new stakeholders who had not previously been involved in the SMVF planning initiative. Those who were unable to attend the public meeting were encouraged to review the plan on the DC government website and submit feedback by email or through a web-based survey tool.

**Next Steps**

The Deputy Mayor for Health and Human Services, the Department of Behavioral Health and the Office of Veterans Affairs will coordinate implementation of the SMVF Action Plan. The leaders of these agencies will coordinate with lead and partner agencies to ensure strategies and outcome measures are incorporated into agency performance plans. This work is expected to begin immediately and will be ongoing during plan implementation. The plan is broken into short, mid and long-term strategies that agencies will accomplish to meet goals in each of the five priority areas.

**A Note on Data**

During the planning process, the SMVF Workgroup quickly learned that data specific to veterans in the District of Columbia was scarce. Similar challenges were noted by states that have participated in SAMHSA’s SMVF planning process. The SMVF Workgroup and the Office of the Deputy Mayor for Health and Human Services believe rigorous data collection is necessary to measure outcomes under the District’s SMVF Action Plan. The Deputy Mayor’s Office, the Office of Veterans Affairs and the Department of Behavioral Health will work with lead and partner agencies to ensure that data collection protocols are in place that combine asking the right questions with available automated systems in order to effectively assess plan implementation efforts.

**CRIMINAL JUSTICE**

*On September 2, 2014, the District Department of Corrections (DOC) identified 47 individuals, or 2.6% of the DOC population, who were veterans eligible for services from the VA. DOC will conduct this assessment regularly to assist other agencies with implementation efforts related to this plan.*

Source: DC Department of Corrections





## SERVICE MEMBERS, VETERANS AND THEIR FAMILIES: ACTION PLAN

*The District of Columbia Service Members, Veterans and their Families Action Plan is broken into five goals organized around priority areas identified by the SMVF Workgroup, including:*

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### HOUSING AND HOMELESSNESS

*In 2015, the Mayor committed \$4.6 million in funds to end veteran homelessness in the District of Columbia.*

Source: Fiscal Year 2015 Proposed Budget and Financial Plan



# SERVICE MEMBERS, VETERANS AND THEIR FAMILIES: ACTION PLAN



## **Criminal Justice**

*Decrease the number of incarcerated service members and veterans.*



## **Economic Security and Employment**

*Ensure economic security and self-sufficiency by connecting service members, veterans and their families to employment opportunities and benefits.*



## **Housing and Homelessness**

*End chronic homelessness for veterans.*



## **Education**

*Enhance opportunities and resources for service members, veterans and their families to pursue meaningful education and training.*



## **Healthcare**

*Improve access to quality healthcare that addresses the needs of service members, veterans and their families.*

These goals are broken down further by objectives and related strategies aligned with achieving each goal. Lead and partner agencies identified in the Action Plan on page 19 are responsible for implementing the strategies and integrating associated outcome measures into their agency performance plans.



**Priority Area #1:  
CRIMINAL JUSTICE**

Service members, veterans and their families sacrifice greatly in service to their country. Often, combat experience can cause post-traumatic stress disorder, traumatic brain injury, and mental health issues that lead to substance abuse and other risk-taking behaviors that prompt involvement in the criminal justice system. The District of Columbia is committed to doing what is in the city’s power to ensure veterans who are involved in the city’s criminal justice system receive the attention and care they need to address the unique issues they face.

The DC Courts are the third branch of the District of Columbia government. The Mayor presides over the executive branch, the Council of the District of Columbia is the legislative branch, and unlike the 50 states, the judicial branch derives its authority from the United States Congress. Congress established the Court of Appeals and the Superior Court of the District of Columbia in 1970. The DC Courts are comprised of the DC Court of Appeals, the Superior Court of DC, and the Court System, which provides administrative support to both courts. The Superior Court handles all local trial matters, including civil, criminal, family court, probate, tax, landlord-tenant, small claims, and traffic.

*Goal: To decrease the number of incarcerated service members and veterans.*

PRIORITY AREA #1: CRIMINAL JUSTICE			
<p><b>Goal: To decrease the number of incarcerated service members and veterans.</b></p> <p>Measures</p> <ul style="list-style-type: none"> <li>• Number and percent of incarcerated individuals in the DOC identified as veterans</li> <li>• Number of people trained</li> <li>• Number of police departments/agencies involved in training</li> </ul>			
OBJECTIVE	TIME-FRAME	LEAD AGENCY	PARTNER AGENCIES
<b>OBJECTIVE 1:</b> Improve identification of veterans and service members involved in DC’s criminal justice system.			
Strategy 1.1: Incorporate the essential questions developed by the Department of Justice into intake documentation across agencies.	Short	CJCC	CSOSA, DCSC, DOC, FBOP, PSA
Strategy 1.2: Implement the Veterans Referral Support System (VRSS) in DOC and ensure that identified veterans are connected to the Department of Veterans Affairs’ Justice Outreach Specialists.	Short	DOC	VA

Footnote: Agency acronyms listed in the Action Plan are spelled out in the next section.



OBJECTIVE	TIME-FRAME	LEAD AGENCY	PARTNER AGENCIES
<b>OBJECTIVE 2:</b> Educate law enforcement, judges, corrections officers and mental health service providers in DC Jail on the unique issues faced by SMVF population.			
Strategy 2.1: Revise existing training materials as necessary.	Medium	DBH	
Strategy 2.2: Expand implementation.	Medium	DBH	CJCC, CSOSA, DCSC, DOC, MPD, PSA
<b>OBJECTIVE 3:</b> Ensure that veterans and service members are represented on advisory bodies.			
Strategy 3.1: Amend establishment order to add a seat on the Commission on Re-Entry and Returning Citizens Affairs for a veteran or veteran service provider.	Short	DMHHS	OPLA, ORCA, OVA
<b>OBJECTIVE 4:</b> Improve awareness of and access to resources that serve criminal justice-involved SMVF.			
Strategy 4.1: Update information and populate 211 and the CJCC Resource Locator annually.	Short	CJCC	DHS
<b>OBJECTIVE 5:</b> Improve discharge planning for veterans exiting DC Jail.			
Strategy 5.1: Increase coordination between homeless service providers and reentry services to improve transition process for homeless, incarcerated veterans.	Short	DOC	DHS



**Priority Area #2:  
ECONOMIC SECURITY  
AND EMPLOYMENT**

Service members transition to civilian life with skills that bring immediate value to corporations, organizations and government agencies. By taking advantage of the employment resources and benefits afforded to the SMVF population, service members and veterans can continue serving their country and provide for their families. The District of Columbia is committed to helping veterans find and maintain careers by improving awareness of local and federal resources, enhancing resources provided by the city, and ensuring District residents who are service members and veterans maximize the benefits available to them.

*Goal: To ensure economic security and self-sufficiency by connecting service members, veterans and their families to employment opportunities and benefits.*

PRIORITY AREA #2: ECONOMIC SECURITY AND EMPLOYMENT			
<b>Goal: To ensure economic security and self-sufficiency by connecting service members, veterans and their families to employment opportunities and benefits.</b>			
Measures			
<ul style="list-style-type: none"> <li>• Percent of applicants that claim veterans preference when applying for DC government jobs</li> <li>• Percent of District government employees that are veterans</li> <li>• Number of people receiving District benefits identified as eligible for VA benefits</li> <li>• Number of resources populated in 211</li> <li>• Number of calls/requests for veterans' services</li> <li>• Number of individuals matched in the military service mentoring program</li> <li>• Retention rates in DC government for participants in military service mentoring program</li> <li>• Number of individuals participating in veterans and service member-specific trainings</li> <li>• Percent of veterans who come through the American Job Center Networks and become employed</li> </ul>			
OBJECTIVE	TIME-FRAME	LEAD AGENCY	PARTNER AGENCIES
<b>OBJECTIVE 1:</b> Improve identification of SMVF population by District agencies, contractors and grantees.			
Strategy 1.1: Adopt standard language to be used on all government forms that ask about military service or relationship to service members or veterans.	Short	OVA	DCHR, DCOA, DHCF, DHS, DOES, HBX
<b>OBJECTIVE 2:</b> Ensure Districts residents who are SMVF are maximizing benefits for which they are eligible.			
Strategy 2.1: Develop capacity within DC Government to assist with VA disability claims and discharge status upgrades.	Short	OVA	DHS, VA



OBJECTIVE	TIME-FRAME	LEAD AGENCY	PARTNER AGENCIES
Strategy 2.2: Compare District (Public Assistance Reporting Information System) and Federal (Office of Personnel Management and U.S. Departments of Defense and Veterans Affairs) data sets annually and help eligible residents access VA programs where appropriate.	Medium	DHS	DHCF, VA
<b>OBJECTIVE 3:</b> Improve awareness of and access to employment resources for the SMVF population.			
Strategy 3.1: Update information and populate 211 annually.	Short	OVA	DHS, DOES, VA
Strategy 3.2: Develop a dissemination plan.	Short	OVA	DHS, DOES, VA
<b>OBJECTIVE 4:</b> Assist veterans with finding and maintaining employment in the private and public sectors.			
Strategy 4.1: Add a course within the DCHR’s Center for Learning and Development for Service Members who are looking to transition from the military to the private/public sector.	Short	DCHR	OVA
Strategy 4.2: Train human resource advisors within DCHR to translate military service skills and experiences to language relevant to civilian jobs.	Short	OVA	DCHR
Strategy 4.3: Establish a military service mentoring program for DC government employees.	Short	OVA	DCHR
Strategy 4.4: Connect eligible veterans with existing external mentorship programs.	Medium	DOES	CCDC, DCHR, UDC
Strategy 4.5: Host SMVF-specific targeted recruitment and orientation events for veterans each year at DOES.	Short	DOES	OVA
<b>OBJECTIVE 5:</b> Improve financial education and literacy for service members, veterans and their families.			
Strategy 5.1: Connect SMVF to community programs and services, and build capacity among partners already serving veterans through Veterans Assistance for Learning, Opportunity and Readiness (VALOR).	Short	OVA	




**Priority Area #3:**  
**HOUSING AND HOMELESSNESS**

Helping veterans and their families obtain and maintain permanent housing is an integral part of the District of Columbia’s commitment to address quality of life needs for our local veteran population. Without adequate housing, veterans and their families face disadvantages in seeking gainful employment, healthcare services, education, and more. By ending chronic homelessness for veterans in the District, the city can foster the stability necessary to allow veterans to thrive in other areas of life and live with dignity.

*Goal: To end chronic homelessness for veterans.*

PRIORITY AREA #3: HOUSING AND HOMELESSNESS			
<b>Goal: To end chronic homelessness for veterans.</b>			
Measures			
<ul style="list-style-type: none"> <li>• Number of organizations participating in coordinated entry and housing placement system</li> <li>• Number of veterans assessed</li> <li>• Number of veterans housed</li> <li>• Number of veterans receiving furniture</li> </ul>			
OBJECTIVE	TIME-FRAME	LEAD AGENCY	PARTNER AGENCIES
<b>OBJECTIVE 1:</b> Improve awareness of and access to homeless prevention and housing resources for the SMVF population.			
Strategy 1.1: Update information and populate 211 annually.	Short	DHS	25Cities
<b>OBJECTIVE 2:</b> Identify resources to expeditiously house homeless veterans.			
Strategy 2.1: Pilot a coordinated entry and housing placement system as part of the Veterans NOW and 25Cities initiatives to prioritize the most vulnerable residents, including veterans, for housing services.	Short	DHS	25Cities
Strategy 2.2: Use a combination of VASH vouchers and local funds to house and provide case management to chronically homeless veterans.	Short	DHS	25Cities
<b>OBJECTIVE 3:</b> Support veterans who transition from homelessness into housing.			
Strategy 3.1: Continue existing and establish new partnerships to provide furniture for formerly homeless veterans.	Short	OVA	DHS, VA

Footnote: The U.S. Department of Veterans Affairs spearheaded the 25Cities Initiative in partnership with the U.S. Interagency Council on Homelessness, the U.S. Department of Housing and Urban Development, the DC Housing Authority, the Office of the Deputy Mayor for Health and Human Services, the DC Department of Human Services, the DC Department of Behavioral Health and community based organizations with the goal of coordinating local efforts to end homelessness by 2016.



**Priority Area #4:  
EDUCATION**

Service members and veterans have a variety of educational opportunities available to them; however, it can prove cumbersome to understand and take advantage of these opportunities while working and raising a family. By educating service members and veterans on current educational offerings and aiding service members and veterans as they transition from the military into college, the District of Columbia can increase the higher education matriculation rate and the quality of education received within the city’s local military population. Additionally, by assisting military children in their educational experience, the District can ensure meaningful education is accessible to all service members, veterans and their families.

*Goal: To enhance opportunities and resources for service members, veterans and their families to pursue meaningful education and training.*

PRIORITY AREA #4: EDUCATION			
<p><b>Goal: To enhance opportunities and resources for service members, veterans and their families to pursue meaningful education and training.</b></p> <p>Measures</p> <ul style="list-style-type: none"> <li>• Increase in matriculation, retention, graduation rates</li> <li>• Decrease in GI Bill usage for non-credit bearing classes</li> <li>• Increase in the number of freshmen veteran students receiving 6 credits from military experience</li> </ul>			
OBJECTIVE	TIME-FRAME	LEAD AGENCY	PARTNER AGENCIES
<b>OBJECTIVE 1:</b> Improve awareness of and access to local and federal education-related offerings for service members and veterans.			
Strategy 1.1: Update information and populate 211 annually.	Medium	OVA	CCDC, DCPS, DME, OCTO, OSSE, PCSB, UDC, VA
Strategy 1.2: Develop a dissemination plan.	Medium	OVA	
<b>OBJECTIVE 2:</b> Increase the number of service members and veterans who are ‘college-ready’ when they begin higher education.			
Strategy 2.1: Apply for funding to begin a Veterans Upward Bound program during the next US Department of Education funding cycle.	Long	CCDC	OVA, UDC
Strategy 2.2: Explore other funding opportunities and programs for college-readiness and success.	Long	CCDC	OVA, UDC





OBJECTIVE	TIME-FRAME	LEAD AGENCY	PARTNER AGENCIES
<b>OBJECTIVE 3:</b> Increase awareness of ability to receive college credit for military service.			
Strategy 3.1: Create a document accessible online that outlines the college credit service members and veterans could earn for military experience.	Medium	CCDC	OVA, UDC
<b>OBJECTIVE 4:</b> Facilitate a smooth transition from the military to college.			
Strategy 4.1: Create mentorship programs for veterans and service members at UDC/CCDC.	Medium	CCDC	UDC
Strategy 4.2: Connect veterans to existing external mentorship programs.	Short	UDC	CCDC
<b>OBJECTIVE 5:</b> Facilitate timely school enrollment, student placement, qualification and eligibility for participation in extracurricular activities and on-time graduation for school-age children in military families.			
Strategy 5.1: Ensure compliance with the Interstate Compact on Educational Opportunity for Military Children.	Medium	DME	DCPS, OSSE, PCSB



## Priority Area #5: HEALTHCARE

Service members and veterans face unique healthcare challenges that often influence their economic and educational opportunities and affect their families. The District is committed to increasing awareness of the resources available to service members, veterans and their families. Additionally, the city’s network of healthcare providers should have the knowledge to accurately and comprehensively serve service members and veterans and ensure they have the personal and family support necessary for raising healthy, vibrant families. District agencies will work to ensure high-quality healthcare services are available to service members, veterans and their families across the city.

*Goal: To improve access to quality healthcare that addresses the needs of service members, veterans and their families.*

PRIORITY AREA #5: HEALTHCARE			
<b>Goal: To improve access to quality healthcare that addresses the needs of service members, veterans and their families.</b>			
Measures			
<ul style="list-style-type: none"> <li>• Number of people trained</li> <li>• Number of organizations trained</li> <li>• Number of service members and veteran serving on health and health licensing boards</li> </ul>			
OBJECTIVE	TIME-FRAME	LEAD AGENCY	PARTNER AGENCIES
<b>OBJECTIVE 1:</b> Increase awareness of healthcare resources that serve veterans.			
Strategy 1.1: Inventory and map healthcare resources that serve veterans and make them available through 211, DC Health Search and the Access Helpline.	Short	OVA	DBH, DOH, VA
<b>OBJECTIVE 2:</b> Expand awareness among private sector medical professionals, DC Government grantees and contractors, and school-based mental health staff of the unique challenges faced by SMVF.			
Strategy 2.1: Revise existing training materials as necessary.	Short	DBH	DOH, OVA
Strategy 2.2: Expand implementation.	Short	DBH	DOH, OVA
<b>OBJECTIVE 3:</b> Track the correlation between veteran status and suicide rate locally.			
Strategy 3.1: Add veteran status as a field on the District’s death certificate.	Medium	OCME	
<b>OBJECTIVE 4:</b> Ensure that veterans and service members are represented on advisory bodies.			
Strategy 4.1: Amend establishment order to add a seat on the Behavioral Health Council for a veteran or a veteran service provider.	Medium	DBH	



## LEAD AND PARTNER AGENCIES

The DC government and federal agencies that will lead and support implementation efforts in accordance with the Action Plan are listed below in alphabetical order.

CCDC – Community College of the District of Columbia  
CJCC – Criminal Justice Coordinating Council  
Council – Council of the District of Columbia  
CSOSA – Court Services and Offender Supervision Agency (Federal)  
DBH – Department of Behavioral Health  
DCHA – DC Housing Authority  
DCHR – Department of Human Resources  
DCOA – Office on Aging  
DCPS – DC Public Schools  
DCSC – DC Superior Court (Federal)  
DHCF – Department of Health Care Finance  
DHS – Department of Human Services  
DME – Office of Deputy Mayor for Education  
DMHHS – Office of Deputy Mayor for Health and Human Services  
DOC – Department of Corrections  
DOES – Department of Employment Services  
FBOP – Federal Bureau of Corrections (Federal)  
HBX – DC Health Benefit Exchange Authority  
MPD – Metropolitan Police Department  
OCA – Office of the City Administrator  
OCME – Office of the Chief Medical Examiner  
OCTO – Office of the Chief Technology Officer  
OPLA – Office of Policy and Legislative Affairs  
ORCA – Office on Returning Citizen Affairs  
OSSE – Office of the State Superintendent of Education  
OVA – Office of Veterans Affairs  
PCSB – Public Charter School Board  
PSA – Pretrial Services Agency (Federal)  
UDC – University of the District of Columbia  
VA – U.S. Department of Veterans Affairs (Federal)



# ACKNOWLEDGEMENTS

The Office of the Deputy Mayor for Health and Human Services and the Department of Behavioral Health led development of the District’s SMVF Action Plan. The SMVF Workgroup was co-chaired by Dr. Elspeth Ritchie, chief medical officer for the DC Department of Behavioral Health, and Ariana Quiñones, chief of staff in the Office of the Deputy Mayor for Health and Human Services.

Dr. Ritchie and Ms. Quiñones would like to acknowledge the U.S. Department of Health and Human Services, particularly the Substance Abuse and Mental Health Services Administration (SAMHSA), for their leadership on the national level and their invitation to participate in the Service Members, Veterans and their Families initiative, the initial driver of the District’s SMVF-focused efforts.

The co-chairs would also like to thank Policy Research Associates, Inc., the SAMHSA-contracted technical assistance provider, for their commitment to assisting the District with development of the city’s SMVF Action Plan. Throughout the process, Policy Research Associates has ensured that the District’s SMVF Workgroup was connected with the best resources and the most knowledgeable leaders in the field.

Dr. Ritchie and Ms. Quiñones would like to also extend a special thank you to the many thoughtful people who have contributed to this plan and will help see it to fruition.

Tommie Abner	DC Department of Employment Services
Melanie Avery	Veterans on the Rise, Inc.
Chanel Bankston-Carter	U.S. Department of Veterans Affairs
Cavella Bishop	DC Department of Health Care Finance
Staff Sergeant Catalina Blackman	DC National Guard – Army
Quincy Booth	Deputy Mayor for Public Safety and Justice
Rachel Bradley-Williams	District of Columbia Public Schools
Cecil Byrd	University of District of Columbia
Brian Campbell	DC Department of Human Services
Karen Carrington	U.S. Department of Veterans Affairs
Rodney Carter	U.S. Department of Veterans Affairs
Matthew Cary	DC Office of Veterans Affairs
Capt. Mike Colston	Clinical and Program Policy Office of the Assistant Secretary of Defense
Felicia Cowser	DC Office on Aging
Kelly-Ann Daniels	DC Department of Health Care Finance
Michael El Shengo	Capitol City CDC
Rufus Felder	Court Services & Offender Supervision Agency
Rebecca Ferren	DC National Guard – Army
Sheree Finley	DC Department of Employment Services
Deborah Fleming	University of the District of Columbia



Andrew Fois	Office of the Attorney General
Brian Footer	DC Office on Aging
Regina Gilmore	DC Department of Corrections
Paul Grossman	Department of the Navy
Kenneth Howard	Office of the State Superintendent of Education
Alfarbi Ishaq	DC Department of Human Services
Fuad Issa	U.S. Department of Veterans Affairs
Nichole Jones	DC National Guard
April Jones	Court Services & Offender Supervision Agency
John Kamin	National Veterans Center/Student Veterans of America
Jeffrey Kearny	Serve DC
Birte Keays	Serve DC
Lt. Col. Brad Lanto	U.S. Department of Defense
Nancy Liebermann	Cornerstone DC
Howard Liebers	Department of Health Care Finance
Maria Llorente	U.S. Department of Veterans Affairs
Crede Lyons	Howard University
Michele May	DC Department of Behavioral Health
Alina McClerklin	DC Department of Health
Geoffrey Millard	Community Council for the Homeless at Friendship Place
Kevin Morton	U.S. Department of Veterans Affairs
Sunghee Park	Pretrial Services Agency for the District of Columbia
Tony Paschal	DC Department of Disability Services
Mario Patrizio	Metropolitan Police Department
Barbara Pittman	DC Office of Veterans Affairs
Sajeed Popat	DC Department of Health
Trina Powell	DC National Guard
David Ramirez	DC Department of Human Resources
Greg Rasheed	Code of Support Foundation
Sean Read	Friendship Place Community Center
Neil Richardson	Community College of the District of Columbia
Orriel L. Richardson	DC Department of Health Care Finance
Susan Richardson	DC Department of Health
Christopher Rollins	DC Department of Employment Services
Sandra Schlicker	Office of the State Superintendent of Education
Master Sergeant Elizabeth Selkridge	DC National Guard
David Selman	DC Department of Human Resources
Tammy Seltzer	University Legal Services Protection and Advocacy Program



David Shearman	Georgetown University
First Sergeant Terrance Smith	DC National Guard – Army
Ryan Springer	DC Department of Health
Jamie Stacy	Code of Support Foundation
Fred Swan	DC Department of Human Services
Michen Tah	Criminal Justice Coordinating Council
Charles Thornton	DC Office of Returning Citizens
Sara Tribe	DC Office on Aging
Edith Westfall	Community College of the District of Columbia
Dallas Williams	DC Department of Human Services
Michele Williams	DC Department of Human Services
Paulette Wooten-Martin	Community College of the District of Columbia
Karen Zilcoski	DC National Guard – Air Force



